

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		1034	2/15
FORMALITY REVIEW	LCK	1070	21 28 101
RESPONSE FORMALITY REVIEW	R.B		05/14/01

# INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)..... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
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